

ENFIELD



YOUTH BASKETBALL LEAGUE

**ENFIELD RECREATION
YOUTH BASKETBALL LEAGUE
REGISTRATION FORM**

PLAYER'S NAME: _____ **SEX:** ____ **AGE:** ____ **D.O.B.:** ____/____/____
ADDRESS: _____ **PHONE:** _____
SCHOOL: _____ **GRADE:** _____

FATHER'S NAME: _____ **HOME PHONE:** _____
WORK PHONE: _____ **CELL PHONE:** _____
E-MAIL ADDRESS: _____

MOTHER'S NAME: _____ **HOME PHONE:** _____
WORK PHONE: _____ **CELL PHONE:** _____
E-MAIL ADDRESS: _____

IN CASE OF EMERGENCY (other than parent/guardian):

Contact Name Telephone Number

Contact Name Telephone Number

SHIRT SIZE: (Youth 10-12) (Youth 14-16)
(please circle) (Adult-Sm) (Adult-Med) (Adult-Lg) (Adult-XL) (Adult-XXL)

Number of seasons played organized league basketball: _____

Are you playing on any other team(s) this season? Yes No

Would you be interested in volunteering? Indicate "F" for Father or "M" for Mother.
Head Coach _____ **Assistant Coach** _____ **Team Helper** _____

***If interested in Coaching, please fill out the coaching application found on
the next page and return it with the registration form.**

PLEASE FILL OUT REVERSE SIDE

MEDICAL INFORMATION

Any medical conditions or special needs volunteer coaches should be aware of?

_____ YES _____ NO

If yes, please explain in detail _____

Does your child have any other special considerations related to behavioral needs which are not mentioned above that our staff should know about to help your child have a positive experience at basketball? _____ YES _____ NO

If yes, please explain in detail _____

RELEASE AND WAIVER

In consideration for participating in the above-referenced program/activity sponsored by the Recreation Division of the Town of Enfield, I hereby waive and release the Town of Enfield, its agents, officers and employees, whether paid or voluntary, from and against any and all claims, suits, actions, damages, liabilities, costs, expenses and or judgments, including attorney's fees and court costs, which may arise from my or my child's participation in the above-referenced program/activity or any illness or injury resulting there from, either directly or incidentally.

I hereby represent that I understand and am familiar with the nature and type of activities in which I or my child will participate as part of the above-referenced program/activity. I further represent that I, or my child, is in good physical and mental health and that I am unaware of any physical or other health condition that would affect my or my child's ability to participate in the above-referenced program/activity.

I acknowledge that I will be solely responsible for the furnishing of all safeguards and appropriate equipment for protection against injury.

I have read this document and understand and agree to its terms and conditions.

Participant/Parent/Legal Guardian Signature

Date

**ENFIELD YOUTH BASKETBALL LEAGUE
COACHING APPLICATION**

NAME: _____ **DATE:** _____

ADDRESS: _____
No. Street City/Town State/Zip Code

PHONE: (h) _____ (w) _____ (c) _____

E-MAIL: _____

Are you at least 18 years of age? Yes No

POSITION APPLYING FOR?

Head Coach _____

Assistant Head Coach _____

Grade _____

Girls Division _____

Boys Division _____

COACHING CERTIFICATION: _____

CPR/FIRST AID: _____

EXP. DATE: _____

OTHER CERTIFICATIONS: _____

COACHING EXPERIENCE:

COACHING PHILOSOPHY:

PLAYING EXPERIENCE:

LIST 2 PERSONAL REFERENCES AND PHONE NUMBERS:

1. _____

2. _____

COACHING APPLICATION DEADLINE: SEPTEMBER 29, 2006

Please sign reverse side.

For the following question, exclude any convictions or arrests which have been erased from your record pursuant to Connecticut General Statutes §§46b-146, 54-76o or 54-142a. Erased records include the following: (a) a finding of delinquency or that a child was a member of a family with service needs; (b) a sentence as a youthful offender; (c) a criminal charge that was dismissed or "nolled"; (d) a criminal charge for which the person was found not guilty; and (e) a conviction for which the person received an absolute pardon. For erased convictions or arrests you are considered to have been arrested and may swear so under oath.

Have you ever been convicted of a law violation other than a minor traffic offense: Yes _____ No _____

If yes, please explain: _____

For purposes of this application, reckless driving, evading responsibility, engaging in pursuit, driving while impaired and driving while intoxicated are **not** considered minor traffic offenses.

Have you ever been fired or asked to resign from a job? Yes _____ No _____

If yes, please explain: _____

Are you a United States citizen or are you authorized to work in the United States? Yes _____ No _____

CERTIFICATION AND RELEASE

I certify that there are no misrepresentations, omissions or falsifications in the foregoing statements and answers. I further certify that the responses given are true, complete and accurate to the best of my knowledge and are made in good faith. I understand that any misrepresentation, omission or falsification may be grounds for rejection of my application or, in the event that I am hired, immediate discharge.

I authorize the Town of Enfield to contact all of the educational institutions, employers, personal references listed in this application and others the Town may deem necessary to contact to obtain information related to my application for employment. I authorize all such contacts noted above to provide information to the Town of Enfield and I hereby release the Town of Enfield and all such persons and/or entities supplying such information from any and all liability and/or damages arising out of the release or use of such information.

I understand that upon an offer of employment, I may be requested to successfully pass a physical examination. I hereby agree to take a drug screening test, consisting of blood and/or urinalysis test(s) to detect the presence of illegal drugs and/or alcohol, (including but not limited to, barbiturates, heroin, cocaine, marijuana) and that any positive test(s) will be confirmed by two (2) alternative methods. I authorize the laboratory conducting such test(s) to release the results of such test(s) to the Town of Enfield and I understand that I may request a copy of such results. I understand that the results of such test(s), if positive, may result in my disqualification from employment with the Town of Enfield. I release the Town of Enfield, employees of the Town of Enfield, elected or appointed officials of the Town of Enfield and I release the laboratory conducting such test(s), its employees and representatives from any and all liability arising from or out of the administration of such test(s).

APPLICANT'S NAME: _____ SS# _____

APPLICANT'S SIGNATURE: _____ DATE: _____

THE TOWN OF ENFIELD IS AN AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER-M/F

REGISTRATION INFORMATION

The Enfield Youth Basketball League is open to boys and girls (Enfield Residents Only) in grades 2 through 12 who are interested in playing recreational basketball. Practice will start the week of November 27, 2006.

The Enfield Recreation Department will accept mail-in or walk-in basketball registrations. All registrations must be received by the deadline. *Those received after September 29 will be put on a waiting list.*

Fee: Instructional Grades 2&3	\$20.00
Grades 4-12	\$40.00

Registration Deadline: SEPTEMBER 29, 2006 at 5:00p.m.

Boys High School Registration Deadline: DECEMBER 1, 2006 at 5:00p.m.

Instructions for Mail-In Registrations:

1. Complete registration form.
2. Include a check or money order payable to the "**Enfield Recreation Department**". Mail-in registrations received without payment will be returned.
3. Include a self-addressed stamped envelope so we may confirm your registration by mail.
4. Include a photocopy of proof of residency. Acceptable forms of ID are: valid driver's license, tax bill, utility bill, renter's/homeowner's agreement. **NOTE: A check is not considered proof of residency.**
5. Mail the registration form, check(s) or money order(s), self-addressed stamped envelope and proof of residency to:

***Enfield Recreation Department
EYBL Registration 2006
19 North Main Street
Enfield, CT 06082***

Instructions for Walk-In Registrations:

The Recreation Department will accept walk-in registrations Monday through Friday 9:00a.m. - 5:00p.m. Walk-in registration must be received by the deadline of **Friday, September 29 by 5:00p.m.**

Proof of residency and complete payment are required at the time of registration.

The parent or legal guardian must register their child. We will **not** accept notes allowing friends, grandparents, etc., to register a child. Registration will **not** be accepted before the initial registration date and phone registrations will **not** be accepted. All fees must be paid at the time of registration. Checks are made payable to the "**Enfield Recreation Department**". A parent's or legal guardian's signature is required for all children's programs.

BASKETBALL EVALUATIONS & DRAFTS

Child evaluations are mandatory for youth basketball. You are required to attend the date and time for your grade and gender. If you are unable to attend the evaluation/draft, you will be placed on a team as a blind pick during the draft. **NOTE: Instructional basketball for grades 2 & 3 do NOT have to be evaluated.**

EVALUATION/DRAFT SCHEDULE: **All Evaluations are held at the J.F.K. GYM**

Boys 7th & 8th Grade
Tuesday, October 17
6:00p.m.

Girls 7th -12th Grade
Tuesday, October 24
6:00p.m.

Boys 5th & 6th Grade
Thursday, October 19
6:00p.m.

Girls 5th & 6th Grade
Thursday, October 26
6:00p.m.

Boys 4th Grade
Thursday, November 2
6:00p.m.

Girls 4th Grade
Thursday, October 12
6:00p.m.

Boys Grades 9-12
No Evaluations
Draft will follow registration

ATTENTION COACHES: Coaching Application Deadline is SEPTEMBER 29, 2006. All coaches must be picked prior to their evaluation/draft date. It is mandatory that all coaches attend their evaluation/draft date. Coaches will evaluate all the players in their division and participate in the draft all in the same night.